

**AN EXPLORATION OF RAPE CRISIS COUNSELLORS'  
EXPERIENCES OF STRESS AND COPING IN THE CONTEXT OF  
THEIR WORK.**

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## ABSTRACT

This study attempts to explore the experiences of stress and coping amongst volunteer counsellors in a Rape Crisis organisation in the context of their counselling work. The literature on vicarious traumatization provides a basis for understanding that trauma counselling can be stressful for counsellors. The study draws on a theoretical base which indicates that neither subjective stress nor coping experiences can be fully understood through a stance which isolates the individual's experience from its context. Informed by the theoretical review and the aims of the study it was decided that a qualitatively design would best access counsellors internal subjective as well as contextually constructed world. The methods of this study consist of a combination of methods, including individual semi-structured interviews, a focus group and accessing information about the organisation. The thematic analysis suggests that counsellors are struggling with issues which stem from the anxieties elicited by the nature of the rape trauma, as well as with parallel institutional and social issues. The themes of transgression of boundaries, the inability to speak out, power and the feminist collective seem to emerge as dominant themes in counsellors expressions of their experiences of stress and coping. These issues seem to parallel the rape, violation, domination, silence and isolation which are part of the social position of women in our society.

## 1. INTRODUCTION:

Rape statistics in South Africa indicate that for the year 1996 there were 50 481 reported rapes and 5 220 cases of indecent assault nationwide (SAP in Rape Crisis, 1997). Rape Crisis documents state that in the Western Cape alone there were 6 288 reported rapes and 1 462 cases of indecent assault. However, it is estimated that only 1 in 35 rapes is reported (Rape Crisis). This high incidence puts pressure on the provision of legal, medical and correctional services. Because rape often causes psychological problems for the survivor, there is also a demand for psychological services to address these issues.

In view of the considerable number of potential rape survivors who may require some kind of trauma intervention, it should be borne in mind that the psychological services provided for the South African population are inadequate for the general mental health needs (Lee & Zwi, 1997). The ratios for mental health professionals to our population are well below those of First-World countries and they cannot accommodate the additional needs created by high levels of violence and trauma (Freeman, 1992).

Non-governmental organisations (NGO's) have played an important role in providing a much needed service for rape survivors and others who are not accommodated in the State mental health system. This study has been conducted at Rape Crisis, an NGO dealing with issues of violence against women and providing a free counselling service for rape survivors. This counselling service is largely offered by volunteer lay counsellors who undergo a training course provided at Rape Crisis. Given the arduous nature of the counsellor's task, it is important to consider not only the needs of the rape survivors but also those who play a vital role in caring for them. This study focuses on volunteer counsellors and it aims to explore their experiences of stress in their work and how they deal with the trauma of rape survivors.

### **1.1. AIMS OF THE STUDY**

This study aims to make both a pragmatic and a theoretical contribution towards understanding the effects of stress on counsellors involved in trauma work and the way in which they deal with it. Such an understanding may assist in designing programmes to improve ways of coping. It could also help to reduce burnout and the turnover rate in organisations dealing with trauma, by providing some containment for counsellors, thus enabling them to more effectively contain survivors. Hopefully this would result in a continuous resource of experienced trauma counsellors within organisations.

## **2. LITERATURE REVIEW**

### **2.1 Rape Crisis Counselling**

In an attempt to help rape survivors, Rape Crisis compiled an information package describing the possible "emotional issues" which survivors might be confronted with, as well as outlining how rape crisis counselling works. According to this literature, rape survivors can experience a range of feelings which may include a sense of horror and rage or feeling dirty and ashamed. Counselling allows for the freedom "to express yourself in whatever way you like, from being irritable and weepy to having explosions or outbursts of anger and not being able to stop crying" (Rape Crisis Information Package, undated: p.6). However, it is not unusual for the survivor to feel that there may perhaps have been something that she could have done to avoid it. Survivors have experienced violation and their life and safety may have been threatened. This leads to a loss in their sense of security and control. This overview coincides with the general literature in the area although McCombie (1980) in addition note that survivors may experience loss of integrity of bodily boundaries because of the rapist's invasion of personal space.

The space provided by counselling offers many rape survivors an opportunity to deal with these strong emotions. According to Spahn Nelson (1997), the counsellor listens, offers support,

validates feelings and experiences and gives an opportunity for the survivor to release some of the burden. Koss and Harvey (1991) caution that rape often causes strong feelings in both survivor and counsellor, so that counselling becomes a challenge which requires a high level of commitment and which is emotionally intense. Spahn Nelson (1997) also states that "As witnesses and healers, we can't help but to take in some of the emotional pain they have left us with. As the clients release some of their pain, we take it in." (p.1). Because of the emotional nature of trauma counselling, there is a need to try and explore our understanding of the effects of counselling on the counsellor.

## 2.2 Vicarious Traumatization

It would be useful to situate our understanding of some of the possible effects of rape crisis counselling against broader developments in the field of helping-induced trauma. In describing the effects of a helper's exposure to another's traumatic material, many terms have been used, such as countertransference, compassion fatigue, secondary traumatic stress and vicarious traumatization (Hudnall Stamm, 1997). According to Hudnall Stamm, compassion fatigue was first described by Figley (1991) when he argued that primary traumatic stress disorder referred to "those who were directly in harm's way: and 'secondary traumatic stress' disorder represents disorders displayed by supporters/helpers of those experiencing PTSD." (Hudnall Stamm, 1997: p.1). According to Hudnall Stamm, originally, this reaction of the helper was subsumed under countertransference, but is found by McCann & Pearlman (1990), Neumann & Gamble (1995), Pearlman & Saakvitne (1995) to be too narrow and it does not address the lasting pervasive schema alterations. Countertransference is described as a concept which refers to the helper's reaction to the client. It is a state directly tied to the client which may direct therapeutic choices. However compassion fatigue, secondary traumatic stress and vicarious traumatization include trait-like changes to beliefs, values and behaviour. An important distinction made by Hudnall

Stamm is that countertransference refers to how our clients affect our work with them, while compassion fatigue, secondary traumatic stress and vicarious traumatization refer to how our clients affect our lives, our relationship with ourselves, our networks and work.

McCann and Pearlman (1990) who created the term vicarious traumatization, developed from Constructivist Self Development Theory (CSDT): combining contemporary psychoanalytic theories of self-psychology and object relations with social cognition to provide a developmental framework for understanding trauma. CSDT understands adaptation to trauma as an interaction between personality (defensive styles, psychological needs, coping strategies), aspects of the traumatic event and social or cultural variables (Pearlman and Mac Ian, 1995). This analytic framework is thus useful in that consideration can be taken of individual as well as environmental or social influences. Although it would be easy to pathologise this form of response to trauma counselling, researchers have pointed out that it is important to recognise that vicarious traumatization is a normal response to working with trauma and is not seen as reflecting the therapist's inadequacy (Neumann and Gamble, 1995).

### 2.3 Stress and Coping

Although the literature on vicarious traumatization seldom explicitly refers to stress theory, this body of literature provides a helpful background in understanding developments in the more recent field of vicarious traumatization. It should however, be recognised that, while there may be useful parallels between the literature on stress and that on vicarious traumatization, there are also considerable theoretical differences. Traditionally, trauma refers to the individual's response and what would in psychoanalytic terms, be described similarly to what Klein (1987) describes as the notion of the ego being overwhelmed by anxiety. A historical review of the concept of stress, on the other hand reveals a lack of agreement on whether to describe it as a stimulus, a response or a

comprehensive combination. While earlier conceptualisations of stress place emphasis exclusively on the stressor, later conceptualisations have more in common with the traumatization approach's focus on internal meaning and experience.

I therefore turn to a review of stress literature over the years which has shown some shifts in researchers' perceptions of stress and how it is researched, with the aim of pulling out and using key ideas in order to inform the perspective used in this study.

Monat & Lazarus (1977) note that Selye (1956) argues that stress is a "disease of adaptation", which is seen as a defensive physiological reaction to noxious stimuli. According to Young (1980) it was Holmes (1967) who further popularised this notion of stress as a response to life changes. In this perspective, the focus is on objective life events and not the value of these for the individual .

In the 1970's, there was a major shift away from the notion of a stressful event towards acknowledging the interaction of individual and event. The cognitive appraisal model, as it was called, arose as an influential framework for understanding stress and coping. According to this model, stress is defined by Monat and Lazarus (1977) as an internal or external event which tax or exceed the adaptive resources of an individual or social system. An important element in experiencing an external event as stressful depends on the meaning that the individual ascribes to it. The usefulness of the appraisal model is that it makes us aware that subjective meanings ascribed to situations influence our experience of stress and coping. In these terms, stress is relational and process-orientated (Monat and Lazarus, 1977). Process orientated means that the person and the environment are in a constantly changing, dynamic relationship that is bidirectional, with each influencing the other. This approach emphasises that, in order to investigate stress of rape crisis counsellors, looking at the meaning which they ascribe to counselling is important.

Having acknowledged the importance of the subject's understanding of the event, it became possible to assess their ability to mediate their response to it. This resulted in a new emphasis on coping. The concept of coping is described, according to Ayalon (1983), as behaviour aimed at cancelling or reducing physical or psychological threat, which leads to the prevention, aversion or control of emotional distress. Problem and emotion-based strategies of coping are used, depending on how the situation is appraised (either as having potential for control or no control). Emotion-focused strategies regulate emotions and distress whereas problem-focused strategies manage the problem that is causing the distress (Folkman, 1984; Monat and Lazarus, 1977). Problem-focused coping increases in situations that are appraised as changeable, thus having potential for control. Emotion-focused forms, on the other hand increase in situations appraised as non-changeable (Folkman, 1984). Control is therefore deemed to be central to coping.

For the purpose of this study, the appraisal model is useful in presenting the concept of looking at people's meanings in order to gain insight into their experiences of stress and to understand their coping strategies. These are obviously important areas in any research in this field. However, this model has been criticised for not acknowledging adequately the way in which individuals' meanings are to some extent socially mediated (Young, 1980).

#### **2.4 Critique of Stress and Coping Discourse**

It is crucial for this study to examine the major criticisms of the stress discourse (which includes the cognitive appraisal model) in order to formulate more comprehensive ways of understanding and researching stress and coping.

Young (1980) posits a critical view, emphasizing that stress discourse is confirming conventional knowledge by locating stress in nature/individual rather than society/culture or social relations. The stress discourse "attempts to connect pathogenic

events to pathological outcomes by the way people perceive and appraise events" (p.134). It therefore has an ideological content, that is, socially constructed "facts", which are construed to produce conventional meanings which are in line with the dominant ideology. The ideological content, according to Young, reflects "beliefs most middle class Americans hold about human nature" (p.133). In other words it thus produces "evidence" that conventional beliefs about social orders are universal to humankind. This is done through tacit knowledge and by researchers maintaining that, methodologically, what they produce are objective, empirically observed facts. Social arrangements become legitimate because they appear inevitable.

Following Young's critique social origins of stressful experiences should be recognised with the social constraints which influence how an individual would deal with them. For the purpose of this study, his work makes us aware that stress is not an individualistic phenomenon, but occurs within a social context. This highlights the importance of locating the experience of stress and coping within a social context.

Newton, Handy and Fineman (1995) similarly criticise stress discourse as portraying the stressed individual as a function of the self - personality, behaviour style, "appraisal process", coping patterns - where these are treated as totally unrelated to wider social and power relations and we are left with the idea that the solution to stress is reliant on the individual and not on social/collective intervention. "The language of stress, with its emphasis on individualism, apoliticism, ahistoricism and so on can be seen as just one further reflection of a pervasive ideology which glosses over the inequalities of power reflected in existing social structures, and lays the blame primarily on the individual, rather than their position in relation to, say, class, race or gender" (Newton, et al, 1995: p.11). Newton et al reflect similar issues as Young (1980) in terms of highlighting that there is an interrelation between the individual and wider ideology. Thus acknowledging that variables such as gender, race,

etc., influence stress and coping of rape crisis counsellors.

According to Fine (1984), who focuses specifically on women, individual coping strategies are presented as "universal optimal ways of coping" and "traditional psychological prescriptions for coping rest on a variety of assumptions which ignore the lived experiences of most women, especially those who are poor, whose lives are embedded in a network of relationships that need to be considered in their coping" (p.249) Fine illustrates how the traditional assumption of "taking-control-yields-coping", as discussed earlier by Folkman (1984), is not applicable across class, race, and ethnic lines and especially not for women. Traditionally, psychologists argue that when in crisis a person needs to take responsibility for problems and solutions, that is, take control of circumstances in order to cope. However, this taking-control theory assumes that people can control the forces of victimization. However, Fine argues that the 'coping through control model' is limited by class, race and gender bias and appropriate only for people who have high social power. This is important as this study is dealing with women who form part of a social group generally regarded as having little power in society. Thus, how does this relatively powerless group cope?

Also, "by establishing hierarchy of appropriate ways to take control, this often 1) denies the complex circumstances many people confront, 2) de facto delegitimizes those strategies for taking control employed by persons of relatively low social power, 3) encourages psychological and individualistic responses to injustice, which often reinforce existing power inequalities, and 4) justifies prevailing structures" (Fine, 1984: p.251). Fine illustrates the lack of knowledge and the need to explore and develop theory around how groups with low social power cope, for example women.

It is clear from this critique that there needs to be a shift from a purely individual understanding of stress to one which includes contextual, ideological variables. Recent trends in

coping literature have moved from seeing coping as individual traits or stable ways, in which individuals are "good" or "bad" copers, to recognising that coping is a process that can vary from situation to situation for any one individual. There is therefore a move to acknowledge the social context of the individual and that social forces impact on an individual's coping (Banyard & Graham-Bermann, 1993). The way an event is appraised by an individual is influenced by the way it is interpreted within the culture or social context (Dahl, 1993).

### **2.5. Stress and Coping in the Context of Feminist Ideology**

While Fine (1984) highlights the importance of acknowledging social contextual forces in trying to assess counsellors' experiences, she perhaps underestimates the way in which feminism has given some women greater power. While it should be acknowledged that there may be a similarity in women's experience of patriarchy, it should also be recognised that some women have, through a process of conscientisation, gained an alternative route to power. It is not possible to achieve an understanding of context and culture of the Rape Crisis NGO in this study without addressing the feminist beliefs which inform the organisation. It is important to be aware of the strong feminist beliefs influencing the organization with which we are dealing, and the way in which these could mediate counsellors' experiences of stress and coping. An attempt is also made to allow feminist guidelines to lead us in our approach to researching stress and coping.

Banyard and Graham-Bermann (1993) critically evaluate existing research on coping from a feminist perspective. They find that studies of coping in the past have ignored women or have only compared women with men, resulting in "finding their skills to be inferior to an "ideal, male model"(p.304). Banyard and Graham-Bermann (1993), find the appraisal model followed by Folkman and Lazarus (1980), Billings and Moos (1981), Pearlin and Schooler (1978), useful, but in a review of research carried out women have consistently been placed at the lower end of the coping

hierarchy. Such an example was the findings of Folkman & Lazarus (1980) that men tend to use more problem-focused coping than women in situations that had to be accepted, leading to the conclusion that men persevere longer than women and "men may be more disposed to think about the problem more than women" (Banyard & Graham-Bermann, 1993: p.305)

Another critique is that the constituencies of these research are not representative of women and men in general, because the samples only consist of White women and men. Since coping is highly specific to both the individual and the context, a broad range of situations needs to be investigated before we have a general theory of coping (Banyard & Graham-Bermann, 1993).

Banyard & Graham-Bermann (1993: p.311) then suggest that an alternative model of coping should be: one that recognizes that "women's views provide a vantage point from which to gain varied perspectives on the coping process"; that this model "incorporates a complex view of gender", it should also be "discussing gender as a process that cannot be seen as independent from the wider social context", thus acknowledging the role of social forces. There is therefore a need to study women in different situations and to recognize how their experience of stress and coping can contribute to existing theories.

For future coping research and theories, Banyard and Graham-Bermann (1993) suggest that there be an understanding that coping occurs within a context shaped by social forces based on gender, race, class, age and sexual orientation. "These forces exert a powerful influence both on how a stressful situation is appraised and on judgements made about what coping resources are available." (p.311)

## **2.6. Stress and Coping in Social Context**

Further important contributions in stress and coping literature have been made by approaches indicating that social parameters

affect stress and coping in ways which exceed the conscious constraints of any social or organizational context or set of cultural meanings. Psychodynamic approaches which deal with unconscious aspects of social life are helpful as they allow for further exploration of the subject's experience of vicarious traumatization and examine the emotional processes of both the individual and institutions.

In investigating the emotional aspects and the process of transferring traumatic feelings, the use of psychoanalytic terms, such as countertransference and projective identification have proved to be useful. These allow for understanding dynamically the process of stress and coping. Countertransference is defined as a process where the client projects difficult feelings to a counsellor within a therapeutic setting. The counsellor is thus played upon by the different projections which she receives and accepts (Tansey and Burke, 1989). The rape survivor often struggles with feelings of vulnerability, helplessness, guilt, shame, rage, experiences of threat to her sense of safety in the world and loss of integrity of bodily boundaries due to the invasion of her personal space (McCombie, 1980). For the rape survivor to work through her traumatic experience, it is the therapeutic task of counsellors to contain these powerful affects. Counsellors are thus faced with feelings which mirror the survivors' feelings of vulnerability, fear, helplessness, guilt and shame. This process for the counsellor can provoke anxiety and she is often confronted by her own sense of vulnerability. McCombie (1980) notes a study done by Zonderman (1975), where rape crisis counsellors indicate that they experience stress symptoms similar to those of their clients. According to the psychoanalytic perspective dealing with rape survivors, this produces an underlying unconscious anxiety.

In turn, [through projective identification, the counsellors unconsciously identify with these feelings. Projective identification is defined as "an unconscious inter-personal interaction in which the recipients of a projection react to it

in such a way that their feelings are affected" (Halton, 1994: p.16). It is not the counsellors alone who contain these feelings from the survivors, but the whole organisation becomes the "container". Helping professions often carry the split off projected emotions for the clients. Counsellors' defences are seen to originate from the defence of the client group, in this case, rape survivors. Some unconscious defences used within organisations as a response to anxieties are healthy and enable staff to cope with stress and develop through their work. Some defences, however, might hinder the organisation in fulfilling its tasks.

It is therefore recognised that as with the individual, there are, within organisations, unconscious processes and anxieties which may at times be too threatening. These anxieties or conflictual emotions may arise from an external threat (for example, the struggle for financial funding), or internal conflict (such as that between different structures within the organisation) or from the nature of the work (Halton, 1994).

According to Newton et al (1995), the "socio-psychoanalytic approach" has been ignored by mainstream stress researchers, because it portrays the stressed person as less individualistic and more dependent on organisation and societal structure. Halton (1994) finds that "Although there is no exact parallel between individuals and institutions, psychoanalysis has contributed one way to approach thinking about what goes on in institutions" (p.11). Mosse (1994), goes further and states that organisations pursue conscious as well as unconscious tasks and both affect their efficiency and stress experienced by the staff. The subject is thus contextualised, since coping with stress is seen as a social defence and a shared experience with a particular kind of context (for example being a volunteer rape crisis counsellor).

The usefulness of this kind of approach has been demonstrated by writers such as Menzies Lyth (1988), as cited in Newton et al

(1995), who focus on stress in a teaching hospital in London, and Satyamurti (1981) in Newton et al (1995), on stress experienced by social workers in their daily lives. The studies depict stress as a largely collective interaction between the members and demonstrate how nurses and social workers employ defence mechanisms in response to the anxieties which their work creates, as well as in response to inherent contradictions found in their institutions.

What is reflected by the study of Satyamurti and Menzies is a move to contextualise stress and coping. Another study by Fineman (1985) in Newton et al (1995) finds that often the "feeling rule" operating between social workers is "never show you can't cope; disguise your feelings of stress; remember, a competent social worker should be able to handle her own stress (the irony in this is that the clients were expected to do the opposite)"(p.132). As Fineman points out, one of the paradoxes of the helping professions is that they are often incapable of helping themselves. The helper expects to be able to cope and often the client has a similar expectation. Thus feelings of uncertainty, alienation or stress may be handled in a certain manner to preserve the professional's persona as a good copier. Again, this study attempts to collectivise the experience of stress.

Handy's (1991) research with psychiatric nurses, explores the relationship between the structure and the ideology of the psychiatric system, and the actions, worldview and subjective experiences of nurses. The nurses' stress was located in their struggle to come to terms with the inherent contradictions in psychiatry: to control patients legally, as well as helping them; to support people in the community, as well as looking for new cases; to institutionalise patients, as well as encouraging autonomy. What this study emphasises is that there also needs to be an awareness of the participants' institutions, and their tacit assumptions and possible contradictions, because they seem to play a role in stress and how the participants cope with it. These studies reflect the way in which the approach or ideology

of an institution is bound to shape how stress is experienced in any organisation.

In other words there is an attempt to investigate the impact of social structures and the inherent contradictions found in the nature of the work and note how these are reflected in the people's subjective experiences. It should also be observed that the social context of care institutions and their role in society and ideology influence the participants' interpretations of situations. This provides an inherent framework for understanding the kinds of ways in which people experience their counselling and their attempts to cope with the stresses which they may be expected to deal with.

## **2.7 Summary**

In summary, the literature indicates that rape is a traumatic event which can evoke strong emotions. Because of the emotional intensity, rape crisis counselling may be experienced as stressful by counsellors. The concept of vicarious traumatization has helped us to understand the psychological effects of trauma counselling on counsellors by acknowledging that clients' trauma can indeed influence the internal worlds of the counsellors.

There has been a shift in literature on stress and coping. Although acknowledging that the subjective meaning of the stressed individual is important, the social milieu (ideology and institutional practices) also play an important role in determining what experiences are experienced as traumatic. This concern was reflected in the critiques of, for example Young (1980), Newton et al (1995), Fine (1984) etc. Various social variables such as gender also mediate experiences of stress and how people deal with them. Especially Feminist literature particularly recognises the need to include social forces in researching participants' experience of stress and coping. In view of this study, and in aid to understand the counsellors' experiences we would need to be aware of feminist beliefs and ideas as this strongly informs Rape Crisis.

A further development in the contextualisation of stress and coping is the recognition that social forces can affect stress and coping beyond conscious constraints. Psychoanalytic insights have proved to be useful in looking at unconscious aspects of the emotional experience of trauma and institutions. Stress and coping, are therefore not just merely products of the individual's personality or coping style, but also depend on a shared experience within a context, as well as the ideology and social structures of institutions. There is a shift to the collective, recognizing meanwhile, the important role of unconscious dynamics in mediating our experience of stress and coping on an individual as well as collective level.

Both in terms of understanding the psychological effects of stress and looking at stress and coping, there has been a development to contextualise, deindividualise, and historicise the stressed person.

### 3. METHODOLOGY

#### 3.1 Aims of study:

Following the literature review, the aims of this study are discussed. This study attempts to explore the stress and coping process of volunteer counsellors in a Rape Crisis organisation. It draws on a theoretical base which indicates that subjective stress and coping experiences cannot be fully understood through a stance which isolates the individual's experience from its context. Drawing on literature, we have seen that trauma counselling can be stressful for counsellors. However, the way in which people appraise and give meaning to situations influences their experience of stress and ways of coping. The underlying assumptions of this study are that it is important to access peoples' meaning of stressful events in order to understand their subjective experiences of stress and coping. However, these meanings and subjective perceptions are shaped by social, ideological and contextual factors. Stress and coping experiences thus need to be understood as a collective shared experience with a particular context. This collective shared experience, however, is not necessarily conscious, but may be manifested as an unconscious collusive interaction between counsellors and a shared experience with a particular kind of context (in this research, being rape crisis counsellors). The collective can be seen to be influenced ideologically and in this study feminist beliefs for Rape Crisis Centres are of key importance.

The purpose of the present investigation is :

- 1) to gain an in-depth understanding of the counsellors' experience by identifying the unique stressors they face in rape counselling and by analysing the meaning of these for the counsellors;
- 2) to describe the process that counsellors undergo in coping with the stressors related to rape counselling and, on the basis of their accounts, to extract the way in which individual and socially mediated coping occurs;

- 3) to make recommendations on dealing with stress related to counselling.

### 3.2. Outline of methods used in the present study

According to the theoretical review and the aims of this study, it was decided that a qualitative design would best access the required type of information, since it is necessary to enter the counsellors' internal as well as contextually constructed world. Unlike quantitative approaches which draw individuals away from their real-life surroundings and then break their experience down into its constituent parts, as Mies (1991) calls it "the dissection of corpses", qualitative research methods "do not break the living connections in the way that quantitative methods do." (p.67). There is therefore a need to capture peoples' experiences within their context. Furthermore, feminists criticise the way women's experiences are judged in predetermined categories, which distort women's experiences and lead to "a silencing of women's voices" (Jayaratne and Stewart, 1991: p.85). Qualitative research thus allows for people's subjective experiences and contextual connections to emerge, and this is one of the primary aims of the present study.

Banyard and Graham-Bermann also (1993) criticise previous research on the subject of coping which had a "top down" approaches to research. They argue that the narrow selection of outcome variables and the use of questionnaire designs, compromise the complete understanding of the coping process and the meaning for the respondents are lost. Accessing the meaning which respondents form around circumstances is important, and using qualitative interviews rather than questionnaires is thought to have been the best way to allow for investigating the aims of this study.

However, Stanley and Wise (1983: p.159) as cited in Jayaratne and Stewart (1991) indicate that "methods in themselves aren't innately anything". Jayaratne and Stewart (1991) thus conclude that: " Instead, the ways in which research participants are

treated and the care with which researchers attempt to represent the lived experience of research participants are of more concern" (p.90-91). It is important for the researcher to be aware of the ethical responsibilities to participants in research of this nature.

In order to access knowledge about individuals in context a combination of methods was used, : gathering information on the organisation (via interviews and literature), individual semi-structured interviews, and a focus group.

The theoretical review emphasises the importance of looking at the context of the respondents, and the initial information-gathering interviews and literature produced by Rape Crisis gave me an understanding of the history, functions and structure of the organisation. This first step also allowed me to form a context for understanding counsellors' experience. Levinson (1991) endorses the necessity to become familiar with an organization's policies, procedures and historical information in order to develop an idea of the organizational history and value system. I have also facilitated training groups and was a supervisor at Rape Crisis two years ago. I have therefore had the opportunity to participate in meetings and interact with members which also gave me a sense of the organization and an idea of 'how it all fits together' which proponents of participant observation have argued is important.

The next phase was scheduled semi-structured interviews with individual counsellors where an attempt was made to tap into the subjective meaning of counsellors and how they interpret their counselling experience. However, recognizing that interviews are very individualistic and that the theoretical base emphasises collective shared meaning, the themes which arose from the individual interviews were then used for discussion during the focus group with the counsellors. Here an attempt was made to capture their shared meaning and collective conscious as well as gaining validity for the interview material (Harding, 1991, in

Banyard and Graham-Bermann, 1993).

### 3.3. The Sample:

The study was carried out at Rape Crisis in both Observatory and Khayelitsha. Rape Crisis is an NGO which provides a free lay counselling service to women who have been sexually abused or raped. At that time there were 30 counsellors (including active and non-active counsellors). The individual sample interviews were with ten volunteer counsellors working at Rape Crisis (seven from Observatory and three from Khayelitsha). From a list of active counsellors, I chose every third counsellor for the interviews. However, those from Khayelitsha were currently active in the office, because there were fewer counsellors (eight). Only women work within the organisation and there were four Black, three Coloured and three White participants. They all attended the Rape Crisis training course and five counsellors had additional training, such as Lifeline, Nicro or counselling experience at university level (undergraduate or postgraduate). Their ages ranged from 20 to 38 while the average age was in the 20's. The length of stay in Rape Crisis ranged from two months to three years.

### 3.4. Interviews:

It was decided to start with individual semi-structured interviews, as opposed to a focus group, in a hope to tap the subjective experience of stress from dealing with trauma work. The strength of interviews is that they allow for collecting information in a natural setting, as well as providing a face-to-face encounter with informants, and this is good for uncovering the subjective side of processes (Marshall & Rossman, 1995). Due to the sensitive nature of the material, the interviews are also appropriate in terms of confidential contact. However, it was discussed with the counsellors that the themes gained from the interviews would be used in discussion in the focus group. According to Giddens (1984) in Newton (1995), "contradictions within society and organisations are reflected in people's fragmentary and ambiguous understanding of their

situation" (p.90). Thus individual interviews can also be a useful source in appreciating how counsellors understand and are influenced by broader contextual, social issues.

The interviews were taped and lasted for approximately half an hour. At the beginning of the interviews, each counsellor was assured of anonymity and confidentiality, and that there were no right answers, but whatever they had to say was important. Their permission to use the tape was also checked. If they felt uncomfortable about transcripts of their interviews being released to Rape Crisis, it was stressed that it was their choice.

During the interviews, particular note was taken of counsellors' emotional responses as well as my own emotional responses in order to gain insight. As Moylan (1994) notes, that it is necessary to listen carefully to people's stories' - it is not just the content, but also the way the story is presented and the mood which gives information.

According to Marshall and Rossman (1995), interviews respect the frame and structure of the participant's response so that the phenomenon of interests unfolds as the participant views it. Semi-structured interviews offer people the freedom to respond in any way they choose, in this way allowing the individual's own interpretations and meanings to emerge (Layder, 1993). However, Marshall and Rossman (1995) recognize that "a degree" of systematization in questioning is needed, but that the participant's information is viewed as "valuable and useful" (p.80).

The theoretical review shows the importance of gaining access to the participants subjective meaning. Counsellors were asked how they experienced the impact of counselling. I asked the individual counsellors how they understood coping as a way of eliciting their subjective perception of what a "coping" counsellor is. I also asked counsellors each to recount a

difficult case. The reason was so that I could get a sense of the type of cases that the counsellors were finding difficult, to try and move to an emotional level and also to obtain a sense of how they managed these situations. In an attempt to engage in real experiences of counsellors and how they dealt with them, I also used prompts to elicit their actual experience such as asking if they experienced a time when they felt they wanted to leave and what happened. Throughout the interview, space was created to allow counsellors' own constructions to emerge rather than pre-empting them.

In an attempt to draw on contextual variables and the collective, it was important to ask the counsellors about their philosophy/views on rape in society in order to see if they contextualised the work that they are doing and to get an idea of how they frame their understanding of rape counselling. There was also a focus on their perceptions of their role as a counsellor within Rape Crisis. Recognising the importance of the collective, I tried to access the shared meaning by asking about the role the organisation plays in helping them to cope with counselling.

Counsellors were, however, encouraged to talk spontaneously around issues and an attempt was made not to carry out the interview in a question - answer format. At the close, they were given time to talk about any issues which they felt were important to share.

### **3.5. Focus groups:**

Harding (1991), as cited in Banyard and Graham-Bermann (1993: p.315) warns that "Those who study coping must particularly be careful that results are not an artifact of their own biases and must continually check their interpretations against the actual experiences of women. This checking may be done in a variety of ways, including the use of focus groups with participants to discuss any research findings." Thus the focus group was incorporated not only to gain validity, but also to provide an

opportunity for participants to express their ideas as a collective, in keeping with the recommendations of the literature review.

The themes which emerged from the interviews were used as guidelines in a focus group with the counsellors. Here the intention was to access the shared meaning and collective experience of stress and coping. The focus group was held during a monthly counselling meeting at Rape Crisis. Unfortunately the meeting was not well attended because of the change process in the organisation. Six counsellors were, however, present and I presented the themes briefly followed by a short discussion and input on these themes. The focus group was held with the aim of gaining some validity and involving the collective, but the turnout of the counsellors was less than expected. Consequently the representation was less than I would have liked, but it proved to be valuable and I decided to use the information.

### 3.6. Reflexivity:

Qualitative research is by nature a reflective and recursive process where learning takes place. We become more aware of ourselves and research can be a process of growth (Ely, 1993). Qualitative research is also value-laden work so that the researcher needs to be introspective and aware of personal biases and preconceived impressions.

I would also like to draw on psychoanalysis for some useful ideas on the concept of reflexivity. Edelson (1985) notes that because we work from a subjective frame of reference, in other words what is studied is the subjective life of the participant, part of the knowledge acquired is through empathic identification or awareness of the various internal states stirred in the researcher. Edelson encourages the researcher to become aware of her characteristics as an instrument in order to discover the influences on her observations that arise from her own nature. Also differentiating between actual data and the inferences based on the data (for example, interpretations, classifications based

on theoretical concepts, or own statements) help to maintain "scientific" canons.

Throughout the research I tried to be in touch with my feelings. My interest in this area developed when I was involved as a trainer (linked to the Child Guidance Clinic), training volunteer counsellors at Rape Crisis in Observatory. I was fortunate enough to continue contact with these "newly" trained counsellors working at this stage in a supervisory role. During the sessions, I became increasingly aware of the emotional intensity of the counselling confronting these volunteers. As the name Rape Crisis suggests, it is a centre for raped women in "crisis". Thus the type of clients were women ranging from being emotionally distraught to extremely defensive and suspicious.

The process of gaining entry and having my thesis approved by Rape Crisis was quite useful in contributing to my research. Writing up a diary after meetings was especially valuable. I would like to recount notes of my first counsellors' meeting. I contacted the counselling coordinator who invited me to introduce my ideas on the research at a meeting. Counselling meetings are held once a month with all the counsellors present. At that stage I informed the counsellors that my research would focus on their experiences as counsellors. They concluded that they would like to participate, but were anxious about what I would find. As one counsellor put it, "what if you find that we are all tired", whilst another told me to be aware that I would be "coming in" and analysing them and "how would you feel if Rape Crisis had to come to the Child Guidance Clinic".

I responded to their fears by recognising the "intimate" process of the research and the sensitivity it requires. This experience was useful in making me aware, first of all, of the researcher coming in as an outsider and the need for building trust, and also of the participants' fears of what the researcher might find. Their fears are also reflected by the nature of their work, in other words, rape: a person "penetrates" without permission

and "takes" without any sensitivity or acknowledgement of the "intimate" process. Exploitation of women, is something that Rape Crisis considers one of their main "enemies".

I went through all the necessary channels for my research to be approved by the organisation. I also established a collaborative relationship in order to avoid a "top down" approach. First the Steering Committee, then the Research Committee met and approved my research. I had meetings with the Director and then the Counselling Coordinator, and was informed that my research would be announced at their Annual General Meeting. I then asked counsellors to participate. However, the A.G.M. was poorly attended and some counsellors felt that I should attend a Counsellors Meeting in order to gain their trust. Certain counsellors also expressed a wish to meet with my supervisor. They wanted their concerns to be made known so that their experience would be treated with the necessary sensitivity.

Throughout this process I was aware of continually having to postpone the start of my research. I recognized, that in order to be transparent and gain their trust, it was important for me to maintain continuous communication and agree to the meetings. However it evoked in me a sense of despair and a feeling that "things were out of my hands" and thus out of my control. On reflection, this feeling made me aware of the very nature of my research. Usually the traditional, positivist framework "prescribes prediction and control" (Unger, 1983, as cited in Jayaratne and Stewart, 1991: p. 89). There is a sense that the researcher has some control as in the end it is she who analyses or 'sees who we are'.

Undertaking research, according to feminist guidelines, is about empowering your participants. It was necessary for me to wait for the meetings, wait for approval etc. for the organisation to feel that it is not disempowered. Their voices would indeed be heard, unlike the silencing of women's voices in society. What the process was revealing was that counsellors resisted the idea that

they might be objects of analysis which appeared to mirror the way society sees women as sex objects or property.

### 3.7. THEMATIC ANALYSIS

Orford (1994) stresses the desirability of using more than one source of data: semi-structured or unstructured interviews, participant or non-participant observation, records etc. as basis for thematic analysis. He further stresses that "analysing qualitative data is rigorous and time consuming" (p.130) and that although the process of analysis is different from quantitative analysis, it cannot be said that it lacks discipline. The transcripts of the individual interviews and the focus group were coded as a means of acquiring useful categories or concepts. This coding was done by selecting key words or labels describing the meaning in a unit text. From there I started developing smaller core themes.

A theme, according to Garner, (1991: p.150) is a "statement of meaning that (a) runs through all or most of the pertinent data, or (b) one in minority that carries heavy emotional or factual impact". According to Strauss (1987) in Orford (1994: p.131) "although the categories, concepts and themes are derived directly from the data, the data do not simply 'speak for themselves'" and "the final result is an account at a higher level of abstraction than the accounts given by the individual observational records." The core themes allows for the material to be unified in terms of a clear "theoretical statement" or "conceptual framework". They are primarily descriptions which are then used with theoretical understanding to provide a background for the discussion on coping.

The themes were chosen according to the theoretical framework that subjective stress and coping experiences cannot be fully understood through a stance which isolates the individual's experience from its context. There needs to be recognition of subjective meanings, as well as contextual variables, such as ideology and the practices of institutions. Coping and stress

also take place in the form of the collective and may be mediated by unconscious processes.

It should be noted that literature and my thesis place a strong emphasis on context and my sample consists of women based in Observatory and Khayelitsha. Khayelitsha is an extremely impoverished Black area, while Observatory is White and primarily middle-class. Rape Crisis in Khayelitsha, as an organisation, also has less history having only been started in 1995. There are obvious cultural and class differences between these areas and any attempt to treat their experiences of stress and coping as similar under the heading of Rape Crisis counsellors, would be misguided. However, race and class are not the main focus of my study, but rather I am considering the collective feminine experience, but where these issues appear to impact profoundly I have attempted to acknowledge this.

#### 4. DISCUSSION

##### Introduction

In this section I will discuss the themes which emerged from the data. The theoretical review has illustrated the importance of contextualising participants so that there is first an investigation into the organizational variables as well as certain societal variables which may influence and shape counsellors' experiences. In particular, I have considered the challenges which aid or hinder coping. It is hoped that this will form a context in which to understand counsellors' experiences. It must be noted this study will investigate certain contextual variables which are bound to be experienced as stressful, but also touch on particular internal responses of counsellors to being exposed to other's trauma.

I in this analysis I have attempted to capture the counsellors description of their own experiences of counselling. I have used direct quotations from the interview transcripts to indicate what the counsellors described in order to capture their subjective experiences and used literature to try and make sense of this. This is followed by a closer look at the particular aspects which counsellors found difficult, to clarify which particular aspects of counselling is being experienced as stressful.

Based on the theoretical review, the importance of accessing people's meaning was emphasised as a way of understanding their experience of stress and coping. I have also explored how they express their ideas as a collective and the way in which these shared meanings seem to be contextualised in the organisation. In summarising I try to integrate the different themes in order to understand what particular aspects of their experience counsellors struggle with and what helps them to cope.

It should be noted that the discussion is based on information from the focus group, as well as the individual interviews. However, I will only make specific reference when differences in the ideas expressed in these settings seem to have emerged.

#### 4.1. Context of counsellors

In providing a context for understanding counsellors' experiences, I will describe the historical roots and structure of Rape Crisis. The organisation was established by a group of volunteer feminist activists in 1976 based on feminist ideology, feminist principles, democracy and human rights. The following is a quotation from a Rape Crisis Information Package, (undated: p.1) giving details of the organisation:

"We also adopt a feminist approach which is based on the knowledge that rape, battering, harassment and exploitation are extensions of sexism and patriarchy or entrenched ideas about the inferiority of women, and therefore a sensitivity about power relationships underpins our work."

According to Koss and Harvey (1991), the feminist theory is characterised by four beliefs:

- 1) that sexual violence against women stems from a patriarchal society - thus feminist strategy for change should include collective and legal action
- 2) that the physical and emotional trauma of rape be articulated as this was ignored by medical, mental health and criminal justice institutions
- 3) that hierarchical structure and authoritarian decision making be opposed and democratic procedure be promoted (women work collectively to help each other)
- 4) that feminist activities be promoted and the problem of sexual violence against women be addressed (p.124).

However, over the years there has been, a "dilution of feminist fervour", but the "formative continuing contributions of feminist thought and action to the course and accomplishment of the Rape Crisis centre movement cannot be overstated" (Koss and Harvey, 1991: p.124). The institution's feminist and humanitarian approach or beliefs would be expected to shape how stress is experienced and how it is dealt with by the volunteer counsellors.

Rape Crisis therefore was structured so that decision making was "flat" and democratic and all staff and volunteers shared similar decision-making and voting rights. There has been a large growth in the organization over the past several years: There are 11 paid employees, although the majority of workers are volunteers. The organisation consists of counselling and public administration sections. Counselling takes place on a one-to-one basis at the organisation or by telephone. The public administration section handles public education and legal advocacy in the area of sexual abuse. Thus, apart from counselling, Rape Crisis is involved in lobbying, external training for other community-based organisations and research on violence against women. The Khayelitsha branch was opened in 1995 with a similar structure, but it has fewer volunteers (eight) to cope with the growing need. The Khayelitsha branch places most emphasis on public education as most Black people in the townships are not familiar with the concept of counselling. Many survivors do not approach Rape Crisis themselves, but are referred from other organizations or institutions.

I will explore the themes which emerge from the context in which the counsellors find themselves, that is the organizational and societal variables which they understand to be impacting on them. This will allow for a context in understanding later discussions on the subjective experiences of counsellors.

#### **4.1.1 Change**

Some counsellors appeared slightly reluctant to discuss organisational matters. One counsellor referred to the "shadow of the organisation", while another indicated that there are certain matters which she would not discuss. The other seven counsellors, however only described the organisation in positive terms. Only two counsellors were inclined to discuss both positive and negative organisational matters. In studying the transcripts, an important theme, of change came up amongst those working in Observatory and this also seems to have an impact on stress and coping of counsellors.

The organization is in a process of continuous change. A document compiled in 1995 on the short history of Rape Crisis illustrates this: "Rape Crisis was started by a few individuals working from their homes" in 1976 (Rape Crisis: Some of our Achievements, 1995: p.1). It then grew and from 1986 to 1991 ran a shelter for battered women and their children, as well as a community education project. However, due to lack of funds, the staff for both had to be retrenched. In 1995, Rape Crisis employed two full-time workers (one co-ordinating administration, the other co-ordinating counselling). According to the 1995 document, "We have undergone much restructuring and strategic planning and now have a steering committee which streamlines management of the organization."(p.1)

The organisation has been moving through transitions which at times create conflict. However, in any organisation which has a constant influx of new members, there are changes to contend with. Change is also related to the organisation itself as there is a constant flow of counsellors joining and leaving. There are thus continuously "old" members and "new" members.

"I think we were all aware that it is the change, the nature of the organisation changes constantly and that is when people battle with old people... a lot of people have been here quite long. So lots of them got to adapt to that change..."

The organisation is also influenced by societal changes and has to adapt to social needs and pressures. According to one counsellor, as South Africa has moved to become a more democratic country, and due to political changes, women's issues have been gaining more importance in society so that Rape Crisis has been giving input at government level. She feels that the public has become more aware of rape and Rape Crisis and funding has been increasing. With this there has become a greater need to expand services in order to meet the needs of society.

"Our work becomes more efficient, in other words we are reaching target people and our cliental has been extended,

increased so it is affecting more women than before and that is a good thing."

The organisation has grown from two to three workers to eleven full-time employees in the period 1976 to 1997. There has recently been a change in the structure of the organisation from "flat" democratic to more hierarchical with the instatement of a director. There has also been a move to pay volunteer counsellors. This has been perceived as a change in the "nature" of the organisation.

" It wasn't very corporate at all, but small, more like a family base, where now it is like a structure, it is a recognised structure, organisation with different implications".

In their previous small, "family" organisation, Rape Crisis was described as a close group of women dedicated towards fighting against patriarchy. However, being part of Rape Crisis now seems to have achieved other advantages causing suspicion about the "purity" of peoples' dedication:

"Everything... they did it because they wanted to help and there was a need and they wanted to fill it and sometimes now .... People are doing it for various reasons, they are beginning to get into Masters, they are getting into Honours , for their CV purposes or for whatever reason I think, that has changed somehow. The primary goal is still to help, but that has not changed."

[Students applying for Honours and Masters in Clinical Psychology are expected to have counselling experience.]

The old "family" setup is seen to have consisted of women who were dedicated to "the cause", and structurally Rape Crisis followed feminist guidelines. Meanwhile, there has been a move towards a more "corporate" hierarchy which appears to conflict with the original guidelines. According to Washkansky (1996: p.28), the move to "a hierarchical management with different levels of authority is associated with principles of business,

which in turn is associated with patriarchy, and male domination". Feminist beliefs still remain the inspiration of most Rape Crisis members, but there is now a contradiction between the original ideals of democratic-decision making and the need to expand which has led to a more corporate structure. Such a change would certainly hold implications for a changing identity. Diamond (1993) in White (1997: p.359) describes a functional identity of an organization as "an openness to change, and a willingness on the part of organizational members to display, examine, and possibly change their private images, feelings and emotions", in other words to have "organizational resilience". The ability to negotiate change is seen as positive and does not necessarily lead to fragmentation. However, Stein (1994) warns that rapid social change threaten the shared image of wholeness. The contradictions found in these changes touch the very fundamental beliefs and roots of Rape Crisis. Negotiating this has proved difficult in the past and may continue to be a problem for counsellors in the future.

In the focus group it was acknowledged that the organisation is undergoing changes, but participants felt that because I was an outsider, and not a member of the organisation, I could not fully capture the nature of the change. Bearing in mind the limitations of my understanding it is still possible to reflect on the way in which these changes might be experienced as stressful by counsellors. These changes are thus likely to influence counsellors' experience of stress in the counselling situation.

#### **4.1.2 Difficulty in accessing social resources**

Apart from looking at organizational variables it is necessary to be aware of societal variables that also influence stress and coping of counsellors. It was clear from the counsellors' experiences that the social environment also may either facilitate coping or hinder it.

"I am sure we are not doing enough. Because we are a few, ...because Khayelitsha is too big and we are not serving Khayelitsha only, we are also serving the black

communities, that is in Langa, Nyanga, Guguletu,... because people they phone us staying there and there, and we help to direct them where is this place because they want to come for counselling. So we need even lot of offices. We need a lot of space."

It would appear that the lack of social resources/support structures is also a source of frustration, especially for Black counsellors at Khayelitsha. Within this, matters such as the lack of space and lack of person-power increase the demand on the few counsellors. It also appears that, because there are so few places where Black people can go for counselling in their own language, the offices in Khayelitsha also receive referrals from other Black communities.

One Khayelitsha counsellor stated that, in general, psychological services are difficult to access in Khayelitsha and counsellors are faced with a flood of people who have problems outside the Rape Crisis area. Another problem perceived by two Khayelitsha counsellors is the way the police handle rape survivors and how they question survivors. It is difficult to obtain cooperation when counsellors need to speak to the police officer involved in a certain case. A counsellor at Observatory also described the anger she felt about the way the rape survivors are treated by the justice system. Often rape survivors are put through another ordeal during the trial. Bazili (1990) mentions the "second assault" that rape survivors have to experience in dealing with the legal system, law, court, etc. A counsellor from Khayelitsha describes:

"...I get so frustrated when I didn't get help from the other people who should be helping, like the police. Then you get frustrated."

Another counsellor from Khayelitsha talks of the difficulties of getting a social worker.

"All the other social workers you have seen, that was on the case, they have failed. The social workers, the health

community workers. So I was the third person on that row, so I didn't want to fail."

It appears that, if the social resources on which counsellors can rely for support are not available or ineffective for whatever reason, this leads to added frustration. It is thus the counsellors who are left helpless, frustrated and unable to help the client beyond their limits. These counsellors recognise that there are certain areas in which they are unable to assist further. However, the people who should be pursuing the case further are not there. Accessibility and support from social agencies are perceived as key factors affecting coping of counsellors. Schauben and Frazier (1995) find that counsellors working with sexual survivors also experienced difficulty in working with the ineffectiveness and injustice of legal and health systems. Counsellors, like their clients, may be traumatized by the victimization itself as well as by the systems supposedly assisting survivors.

#### 4.1.3 Culture

For counsellors in Khayelitsha there are, in addition, the cultural challenges:

"I think what I find very useful, you know, is having those, monthly meetings we use to have with all the other counsellors. Because like here in Khayelitsha we are only dealing with the African people. And you find that the experience that you go through here is a little bit different from what's going on in Observatory you see. Observatory people when they go there, they know what they want, they know why they go to Observatory. Where if here, with our people, some come here, think that they are going to get medicine, so you see. Those are one of the kind of things you come across and then when you relate it to sort of to them, and they relay sort of to you. Then you find out no it is a bit different, you know."

The theme of cultural differences emerged in the interviews with

counsellors from Khayelitsha. Counselling in Black communities seems to be a "new" concept. This is reflected by many of the Khayelitsha counsellors who are faced with women being referred there. These women have no idea why or what is going to happen. It is evident that counsellors are increasingly educating and informing people about counselling before they actually counsel.

According to one counsellor, the whole concept of approaching strangers to share problems is alien in Black communities. Traditionally, if one member of the family has a problem, then this is handled within the family.

"In changing the attitude, especially in an African culture, so I am trying to, not specifically in counselling, in everything that I do, I try to make people think and see other ways of growing and helping each other. So that's where I always introduce the counselling in a way that within the African culture you don't go outside with your problem. So that is what we are trying to change so that people understand that there are people who are there for them, they can come for help. And these people have dedicated their lives to helping them, so that they understand that kind of thing."

As Rape Crisis in Khayelitsha is a recently established branch of the organisation, it has considerable amount of work to do in public education on rape and sexual harassment in the community in addition to counselling. As Fine (1984) however, warns of the necessity to be cautious and, be wary of imposing "Western" beliefs, of how people should cope. Although not specifically mentioned by Rape Crisis counsellors, there needs to be a careful analysis of African traditional means of coping.

In summary, issues of change in the structure and nature of the organization, as well as the difficulty accessing in social resources and the challenge of addressing unfamiliar cultural practices, were generally recognised as an important part of the context of the counsellors' experience of stress or vicarious

traumatization.

## 4.2. Counsellors' Experiences

### 4.2.1 Counselling

In combination with the context, our theoretical framework also indicates the need to explore subjective experiences. I will thus investigate counsellors' experiences of counselling further.

All counsellors agreed that counselling is emotionally and physically strenuous. The nature of their work, dealing with other people's intense emotions, seems to have an impact on counsellors themselves:

"I just couldn't take it. The pain, I will never forget that pain in that child's eyes, the pain, she was broken, she had no trust, she was actually killed, she was numb. She couldn't say anything and she actually said to me never ever trust any men."

This particular quotation reflects both the pain of the survivor and the impact it had on the counsellor. Rape evokes powerful emotions, such as anger, fear, neediness, denial, pain and shame in survivors and the counsellors are confronted with this. To come face to face with victims of abuse can be overwhelming. The survivor is a person who lived through the actual experience and the pain is very real. One counsellor describes her own difficulty in dealing with survivors:

"Ja, it becomes very real, because there is the real person,... Ja it is a real person, you feel sorry to say but it is quite a shock to your system coming face to face with it in life."

Rape is a harsh reality as well as the damage, hurt and outrage which the survivor is left with. It is this "damage" which counsellors face in the survivors. Another counsellor describes how she feels in a session with a rape survivor:

"Sort of twenty minutes or halfway through when you get to the point where the client almost relive and experience it, that is when I feel most helpless and gets out of control"

The "helplessness" and "out of control" may reflect the same feelings as those which the rape survivor is experiencing.

The pain and "damage" of rape does not remain with the survivor alone, but according to all accounts, there is an acknowledgement of the "effect" of counselling and "damage" suffered by the counsellor.

"If I was full time, I don't know how.....probably be a nutcase. I would be so highly strung, nobody would want me around. Because I do appreciate the fact that it is very, very strenuous work. And thank God I don't have to do it all the time."

"I was feeling tired. ... So I did know that I also need a person to talk to."

There is thus an acknowledgement of the continual cycle of transferring trauma. After heavy sessions counsellors need to talk about their clients' trauma, as well their own responses to this trauma.

It is not only strong emotions which are evoked within counsellors, but according to Neumann & Gamble (1995), counsellors over time begin to view the world through a trauma lens. They become suspicious of others, anxious about personal safety, and despair about violence and cruelty in the world. In this study, two counsellors described experiences which reflect a degree of vicarious traumatization, where their sense of safety and trust of their world have been negatively influenced:

"...what a horrible place this world is. I am feeling very scared these days, I don't want to walk around in the dark, I don't want to drive in the dark. Because most of my clients were attacked when they were walking around. I feel incredibly scared when I see woman walking on the road, I just want to stop and say get in my car and I will take you where ever you are going, because, there is a feeling of feeling very unsafe at night or walking alone I am far more aware of things around me. Where I am going, I mean I don't want to go out and invite.....and just

what a horrible place the world is, how people can be so cruel."

In analysing counsellors' experiences, therefore there seems to be evidence of being affected by rape trauma counselling. In this study, a counsellor relates:

"Well, like you are going to hear these horrible things, what these men do and how do you fit that into your own world, I think that is quite difficult, that one thing often, it should be problematic, I think most people think. I mean you see these terrible, terrible things. How do you come and accept it. Maybe half distance thing, because it doesn't really happen in front of my eyes the whole time. My little world. But then also I think by accepting it, I don't think the world is a nice place."

It would seem that counselling has negatively affected her perceptions of the world, and this seems to follow what Schauben and Frazier (1995) find in their study of counsellors with sexual abuse victims, in which they found changes in their beliefs (being more distrustful of men and their loss of innocence).

All counsellors interviewed had said they had experienced negative emotional effects as a result of their work. However, there were two cases where their beliefs about the world had also been affected. This raises the question of whether being 'affected' is the same as being vicariously traumatised. It appears that counselling work is emotionally stressful, but not necessarily to the extent of feeling overwhelmed. Furthermore, there is also evidence of being positively affected by counselling. Four of the counsellors' stories reflect more than experiences of stress and pain: there is a sense of "enrichment" on a personal level:

"My role as here, I more and more I find that I am learning, just sort of right to the position of a student, but I think within that learning and within humbling myself to that position, I help others to come out of the ordeal of rape, And I find that helps a lot,..."

Counsellors also achieve the personal satisfaction of a "job well done" and, through counselling, the validation and affirmation that "you" have helped. Schauben & Frazier (1995) also find that watching clients grow and change, as well as being part of the healing process are considered positive aspects of counselling. Two counsellors indicate that, through counselling, it is not only the survivor who can be affirmed through the process:

"especially when a person, some clients can relate to you and also the feedback saying that, thank you for being there for me. Then you feel that you are doing something."

"Oh, man, personal, completely [unclear] my ego I think, we all like to like I said earlier, you like to feel that you are needed and you like to feel that we are wanted and do something good, whatever that means to us."

In summary, despite the negative stressful aspects of counselling and the "cycle" of trauma, where counsellors also feel a need to talk, there also seems to be learning and affirmation for the counsellors. All counsellors find their work stressful, but only two showed signs of traumatization, indicating that rape counselling may be emotionally demanding, but not so that it interfered with their view of the world. While counsellors are in touch with the feelings evoked by their work, it does not appear to be the same as vicarious traumatization. Their responses in most cases do not easily fit the conventional category of vicarious traumatization.

#### 4.2.2 "Most Difficult" cases

Based on the counsellors' description of their experiences, it appears that rape counselling can be stressful and counsellors are indeed emotionally affected although not always vicariously traumatized. I will examine more closely the counsellors' description of their difficult experiences as a means of gaining greater insight into those aspects that "affect" counsellors.

Six counsellors referred to an experience where certain clients evoked stronger emotional reactions from them. A difficult

element is that there was an identification or "connection" with the client. Two counsellors described the feeling that the counsellor and the client have something in common which made the counsellor more sensitive, for example:

"I wish I could take her with me. I really felt a sense of a strong connection that I couldn't break. The only way I knew I could come out of it from realising that look it will have to end someday,..."

This identification can be at various levels for example, both counsellor and survivor are women and one counsellor said that she counsels "Because I am a woman".

However, in the descriptions of three counsellors it appears that identification may also be based on similar life experiences. One counsellor described that, through rape counselling, she has become more aware that she was also raped as a teenager. Before joining Rape Crisis, she told herself that 'all boys use force since girls are usually scared the first time'. She has since become more aware of the injustice. Three counsellors talk about identification on the level of similar life circumstances, evoking the fear for the counsellor's and family's safety. For example, a counsellor recounted how a certain client's experience evoked fears about supposing that the same happened to her daughter.

"When somebody like a 14 year old sitting there, telling you what has happened to her, you think of your own child. How will I cope with a situation like this if this was my daughter."

Conversely, however, one counsellor mentioned a difficult case where she was unable to identify with the client because of the age difference (she was counselling the mother of the rape survivor):

"I feel stronger when I am with the client. Maybe because they are generally my age. I was feeling helpless with the mothers, I feel what I say does not get through to them in the same way as with their daughters, maybe because their

daughters are my age normally."

Here again is the issue of identification, but in this instance the counsellor feels that, because identification on a certain level could not happen, counselling becomes more difficult because she feels she is "not getting through" to the client.

Another aspect all counsellors shared is that sometimes it is difficult to separate, distance and leave feelings which are evoked in counselling, such as sadness, helplessness, anger etc. This feeling is described by two counsellors as one which stays "inside": "When you are the counsellor, you feel it inside you. You want to help this person". Because of the feelings being carried "inside", it becomes difficult to separate work from home.

"...and then because you go home, it is difficult sometimes to leave the work at the office. Because it is about life, so you don't leave it there, it is on your mind. While you are cooking, while you are in the bathroom, you think about the case. So and I felt I need a break."

In other words, there is an invasion of the counsellor's personal life space. In this instance the most difficult part of counselling for her is that the survivor's issues seem to "follow" her to the extent that she needs a distance "break".

Another difficult aspect, according to four counsellors, is maintaining the counsellor role. Often there are cases where clients seem to need more than an opportunity to deal with their feelings. Counsellors thus sometime feel a need to provide material assistance. There have been cases of individual counsellors giving money, or clothes or even babysitting for the client, but providing material assistance to all clients is an impossible task and beyond the scope of Rape Crisis as an organisation. However some counsellors feel compelled to help:

"I need to give her something tangible, then I know I will be able to turn my back on her with a clear conscious, you know ... And that day I gave them money to go home and money to carry on until the next session. I thought I'd

lose my position as a counsellor here as a result of that,"

On closer inspection the different areas of difficulties described by counsellors involve maintaining boundaries: where strong identification or issues from the counsellors' personal lives are evoked, or in keeping issues emerging in counselling separate from their personal lives. These difficulties can sometimes lead to overwhelming feelings or for counsellors needing to act beyond their role as counsellor. This may also lead to situations where Rape Crisis boundaries, in terms of what they offer clients, are challenged and sometimes crossed. When this happens, counsellors may be left feeling isolated with overwhelming feelings. Schauben & Frazier (1995) found in a quantitative analysis, that for counsellors working with sexual abuse survivors, the most common reported difficulty was therapy management (that is, maintaining boundaries, setting limits, etc.). Their analysis however does not clarify the exact nature of those difficulties.

#### 4.2.3 Boundaries

Due to the importance of the recurring theme of boundaries, it may be useful to look further at the counsellors' experiences of this issue. One experienced counsellor describes how she came to deal with Rape Crisis counselling:

" And by then I started setting firmer boundaries, it was quite easier, it takes very long,..."

Interviewer: What do you mean by boundaries?

"Boundaries I think it is tension separating you as the counsellor from the [unclear] a defence, [unclear] And boundaries is kind of making yourself comfortable."

Boundaries are thus described as a kind of "separation" and "defence" which allows the counsellor to feel at ease with her role, which by its nature is felt like tension. Likewise, it is this tension which is hard to maintain and this is reflected in counsellors' accounts of their most difficult cases. The importance of boundaries is also reflected in what counsellors

perceive as an "ideal coping" counsellor:

"Okay I would say a counsellor who is coping, I would say it is a counsellor that can not exactly put as a boundary between work and personal things. But who can have both, but be able to work through them at the same level without the other side dropping. I mean putting them at the same level in a way. Knowing that when I am a counsellor, I do this and that and that. But I am able at the same time to be myself and focus on my life."

"Ja, because when you think about counselling, you think about all those people, all those values becomes lost. So if you can be your own self, when you want to, and then I think you are a coping counsellor."

"And ja to feel I think a coping counsellor is one who when they are in a session, is totally focused on that crime and that current need. And not like be thinking about oh God I got to get to the library in time, I got, you know, search around with other issues, because they just too overwhelmed, I think you got to be fully here."

"I think you should be very aware of how much you are able to give at times and you know that you don't bring yourself out to try and take on rescuing the whole world."

"I think a coping counsellor is someone who can handle the sort of stress they are getting sometimes, they can keep it at a level that they can cope with, that they won't perhaps see too many clients, or they were handling one difficult client they will seek help,... They will be very responsible. I think for me too coping would mean being very responsible, knowing your limits, knowing your abilities and making sure you achieve them. And the various ways to relieve those tensions from the counselling."

In the focus group, it was agreed that indeed issues around boundaries are difficult. However, the question arose whether problems with keeping boundaries clear led to a case becoming more emotionally difficult for the counsellor. Or on the other hand, is it that the more emotionally distressed the rape survivor is, and the severity of the rape, makes it more difficult for the counsellor to maintain clear boundaries. It was felt that, because counsellors often deal with seriously traumatized women, the very nature of the counsellors' work makes it difficult to maintain clear boundaries.

Perhaps the theme of boundaries is not surprising in rape crisis counselling, since counsellors deal with clients whose boundaries have been violated. This could be understood psychoanalytically through the concept of projection. Where often in helping professions clients project their difficult emotions on to the staff. This location of feelings in others brings some relief for the client. Rape counsellors thus become the containers for these anxieties, through the process of projection identification which seem to mirror the anxieties of the rape survivors (Halton, 1994).

In spite of the difficulties with boundaries, it should be acknowledged that the counsellors value closeness to their clients. An absence of boundaries is not for them simply the source of difficulty, but a potential source of power and affectedness. This perhaps links to the feminist ethos of the organisation which values the unity of women above separateness.

For example, a counsellor describes what she believes is the difference between a counsellor and a social worker:

"Personally I see a difference between them, because like with a social worker, what I see is that they work with people. But they don't focus on that person as an individual or they don't have that closeness with the client."

She then describes the relationship between the counsellor and

the survivor:

"I'll take example of the rape victim. That person needs a very close companion and even I would say closer than friends, for them. So this means that they will tell you everything... the counsellor works with the heart of the person. It is a relationship that is so close..."

This somehow reflects the belief that the counselling relationship is intimate and that the lay approach being closer than a professional approach. Another counsellor describes how it feels to be in a counselling session:

"Cause for a while you forget everything you know and just deal with this from your heart and that is very difficult" Again, there is a description of the closeness and the lack of boundaries between counsellor and survivor.

Another counsellor also describes counselling:

"When you counsel somebody, you try to do your best. You give whatever you've got. You actually give the last of whatever you've got."

This reflects once again that there is almost no boundary to how much the counsellor gives of herself. There is the sense that the role of a counsellor is the total involvement of "heart" and "soul" in the counselling relationship.

These ideas seem also to reflect a feminist understanding of clinical work. Feminism challenged the previous belief that human science was objective, neutral, value-free, autonomous and authoritative. Feminism has also contributed greatly to the breakdown of the notion that the subjective distorts and has, in opposition, promoted the value of allowing for subjectivity and societal entanglements. It has challenged the idea that as researcher or helper we had to detach and disregard our own experience of life and historical experience. Feminism also promotes the inclusion of "our experience of our own bodies as well as our experience with our environment" in working with people (Mies, 1991: p.67).

According to Mies (p.70), therefore the terms of "partial identification" and "affectedness and concern are central terms of the new feminist initiative". This can be seen to encapsulate the very problem that counsellors are struggling with. A counsellor describes why she got involved in Rape Crisis:

"Specifically Rape Crisis because it was something I feel strongly about, something I can really get involved, because I am a woman"

This counsellor is referring to an identification with the plight of all women. This identification starts making sense when considering the central idea of "partial identification" found in feminist thought. On the concept of "partial identification Mies notes:

"That is to say, not only do the "other" women have a problem, but I do too. This enables recognition of that which binds me to the "other women" as well as that which separates me from them. Binding us are experiences of women all over the world of repression, sexism, and exploitation" (p.79) .

Similar to the counsellor's communication, this reflects the notion that as women all have been affected at one time or another by male dominance. It is thus emphasised that women must understand and empathize with each other on the basis that women know how it feels to live in a patriarchal society. It is also acknowledged that all women can identify with the vulnerability of being a women in a male dominated society. Identification is somehow encouraged. One counsellor states:

"So I feel quite strongly as I say, because I take a personal interest, you know at any time I could be raped"

The feminist notion of "affectedness and concern" can also be found in all counsellors' communications:

"She [the survivor] did not return. I was so very much concerned"

"And it was constantly on her mind in fact she was talking how it was on her mind and she was crying, and I was getting very worried"

The term "affectedness and concern" is defined by Mies (p.80). "That is to say we recognize that we are not dealing with a mechanical stimulus-response scheme, but expressed in the concept of affectedness and concern is the quality of feeling."

In feminist thought, there is thus room provided for the acknowledgement of being affected and concern for the survivor who is seen as 'like our own'. What becomes clear is that extremely important concepts of 'partial identification' and 'affectedness and concern' found in feminist beliefs, can create difficulties in emotionally intense work such as rape counselling where boundaries might provide some protection. It makes the issue of 'Where do I as counsellor end and where do I as woman and sister begin' a central one.

Similarly, as discussed in the organization's history, the feminist guidelines clearly emerged in the main discussion in the focus group. Counsellors discussed the "ethos" or "ideology" of Rape Crisis counsellors. It is felt that the kind of approach used by Rape Crisis is that knowledge and ultimate theory lies in the survivor and layperson. Counsellors are encouraged to stay in touch with being "human". The real healing comes through being "connected" with the client. Counsellors are also encouraged to have an ongoing learning and to explore their own boundaries. The lay counsellor uses a more "humanistic" approach where there are less clear-cut boundaries in terms of outside contact with the client for example. While the "humanistic" approach allows counsellor and client to relate to each other on a personal level, it could, however, leave the counsellor more vulnerable.

Counsellors argued that professionals often use theory and other boundaries as a "defensive" means. It was felt that, on the one hand, the boundaries set up by the professional often protect that person, but make her more detached from the survivor. Traditionally professionalism and theory have been seen, as in the realm of authority and "malestream", while approaches which are more representative of women are human, experiential and

connected, etc. (Mies, 1991).

Although the "humanistic" approach is encouraged, this is easier said than done. It seems that the perceived role of a counsellor does not always allow for that free acknowledgement that as a counsellor she too has been affected.

"She cried and cried, at first I wanted to cry too, and yet you are not allowed to do that. Because the minute you start crying, yourself, she lose hope, you know."

In counselling, the counsellor is expected to have empathy for the clients, that is understanding and an attempt to put herself in the shoes of the client. Clients are encouraged to share their feelings in order to work through them. However, there seems to be an implicit rule that prevents the counsellors self-disclosure. This has somehow been interpreted as they need to be "strong" and in "control" of their emotions. Thus, on the one hand, empathy and being 'human' are encouraged, whereas showing reaction to pain is not acceptable, and this is a difficult task, especially for beginner counsellors.

The change in organisational structures, feminist ("family") to "corporate" ("professional") is also reflected in the counsellors' communications. In the individual interviews, there was evidence of tension between professionalism and an ethos of "staying human". As stated earlier, there is emphasis in Rape Crisis on being "real" and experiential rather than using theory:

"And for me it is not about giving advice in a psychoanalytic manner, It is just about giving them what they need right now".

However, there seem to be strands of professionalism in their work and tension becomes evident in counsellors' communications.

For example:

" No, it was ethics and things, I could have taken the child, I could have, but it was of the way things are I couldn't"

"That just had to happen and I knew I was violating a lot of rules, and that, because you are not suppose to be

sharing your point of view about your life. I should not have done that"

"I had them [clients] wanting to be friends, which is obviously not allowed to happen".

The tension between a 'humanistic' and a 'professional' approach can lead to contradictions which are difficult to maintain. They appeared to be deprived of some of the safeguards of professionalism, yet are robbed of the relaxation of non-professionalism.

#### **4.3. Counsellors accounts of what assists them in coping**

##### **4.3.1 Talking**

Like rape survivors, all counsellors expressed a need to talk through their difficult experiences. Most emphasized the need to talk about their experiences as a means of coping. This ranges from talking with family, other counsellors, to a more formal supervision as a means of support:

"Even though you don't mention names, you just talk about your own case not about somebody else's case, you talk about your own case. That person helps and you actually feel good about it afterwards. You feel human. And if you don't, maybe you had a difficult case and you don't call somebody to talk about it. You will never be able to sleep, you don't sleep. You toss and turn and you find out that you are not [unclear] snapping at your children, snapping at your husband, because it is in you, and you never get to talk about it to somebody maybe who understand what you are going through, then you feel better afterwards."

However, this quotation also highlights the issue of confidentiality. The counsellor explains more about her need to talk:

"Like I said to you we talk about it, whatever happens here between a counsellor and a client is confidential. You don't discuss your case with any other counsellor. If you do, you don't mention names or you like make examples..."

Once again there is an element of professionalism (confidentiality) which seems to put a restriction on them. In essence this code of confidentiality seems to be in contradiction with talking as a means to deal with counselling stress.

The focus group discussion also confirmed the need to talk and share feelings and experiences amongst each other in order to cope with counselling. This is similar to the findings of Schauben and Frazier (1995) in their study of counsellors with sexual abuse victims, is that support from colleagues acts in a positive way. Sharing can be seen to promote a sense of acceptance and safety amongst counsellors which is important because they deal with intense and often frightening emotions. Amongst most counsellors there is a need to share feelings and experiences and this means of coping seems to be prominent.

There are, however, different levels at which sharing takes place. At an organisational level counsellors regard counselling meetings, meetings between Observatory and Khayelitsha and supervision as extremely helpful. Most useful of all is the space to give vent to feelings. There is a place to offload the feelings and images evoked from counselling. It is space created for this purpose where there is no need to feel that it is "burdening" others. There is often a sharing of information, skills and options. Counsellors also gain reinforcement and support. The sharing of these experiences also breaks the isolation which experienced when counsellors come in for counselling only. Counsellors often find that they are not alone in their experiences, insecurities and fears. According to Spahn Nelson (1997) it is important to recognize that it is "normal" to be affected and that 'You are not alone'.

However, a counsellor from Khayelitsha also suggested that, when counsellors from Observatory and Khayelitsha meet, there is also an opportunity to observe the differences between clients attending each centre. As discussed earlier the fact that many clients coming to Khayelitsha have no knowledge of counselling

and the counsellors provide a considerable amount of "education" around counselling. There is thus a sharing of experiences.

Another important aspect of sharing is that counsellors feel they need to talk to someone who will understand, and Rape Crisis as an organisation offers a safe space to look in-depth at the actual counselling experiences.

"The problem is I don't often talk to my friends about rape in detail or socially. Because lots of people, unless they initiate it. Lots of people don't like to even talk about it. Or they don't know how to talk about it. In this organisation and supervision, whether it is formal or informal, I get the type who need to talk in detail about it, whatever I want to, because I can't do it socially. So I mean here I can talk about the most intimate stuff, not intimate, most personal and intricate details, difficult stuff. And that is what often offers me more than anything, that opportunity to actually talk about rape and the seriousness of it and what happened without officially breaking the confidentiality."

One counsellor also proposed that although help is available in the organisation, it is necessary to ask for it. Not all counsellors make use of the formal support structures available as there is also another level on which sharing takes place. Much of the debriefing and information sharing often happen informally, in walking out of the session and talking to any counsellor in the office, or in cliques of counsellors who feel comfortable with each other.

This need to talk came across as strong together with the realisation of the "damage" that occurs when there is not an opportunity to talk about difficult cases. There was a feeling that if difficult counselling experiences are not discussed, they remain with you. In the course of an interview, a counsellor, broke down when she recounted her story of feeling alone when she

was carrying a difficult case. She said that she was not aware that she was still carrying these feelings.

Counsellors feel that talking is important for coping and, according to Klein (1987), talking allows one to put experiences into words and has an "organising function". "It is through talking that for the first time we can reassess what has happened, reconsider past events and reorganize our understanding of ourselves". "Talking is an act of making one's experiences conscious and once it is conscious it allows for a process of depersonalizing and distance. Thus for the first time the "I" is distanced from what has happened to "me", thus allowing for some perspective and leads to increase knowledge of our self" (p.376).

#### 4.3.2 Silence

However, paradoxical to this strong individually expressed need to talk, the organisation's counselling meetings and supervision meetings are poorly attended, both at Observatory and Khayelitsha. Supervision in the organisation is currently strongly recommended and is supposed to take place in groups. However, on the other hand, the organisation has been experiencing a problem that not all counsellors attend meetings and supervision. A response of a Khayelitsha counsellor about such meetings was: "It is suppose to be, but it is difficult. As I say, we are trying, but it is not happening."

A counsellor from Observatory said:

"The problem we are having at the moment also,..is that new counsellors lots of them as the time goes on, all the training courses they do the same thing. They know supervision is an option. So it is given as an option, instead of actually saying you have to be there. Because organisation want you to make the choice... I think supervision has to be made compulsory, at least the first month, they shouldn't be given the option."

Thus it seems that in reality there is not as much talking and

sharing amongst counsellors as they would wish and need. Washkansky (1994: p.27), in her psychoanalytic analysis of the Rape Crisis organisation in Observatory, also notes that "although not overtly stated by members, I have understood from the analysis that there is a covert agreement not to speak about the unbearable in the organisation". I would like to make use of psychoanalytic, as well as social understandings, to make sense of the silence. There is still a lot of shame around the powerless feelings evoked by rape. Rape survivors may experience difficulties in talking about their fears and of feeling humiliated, vulnerable and weak. It is widely accepted that people will defend themselves against the 'I am weak, helpless, vulnerable' feelings (Klein, 1987). Similarly it may also be difficult for counsellors to talk about feeling vulnerable. The silence can be seen as a defence, numbing the pain and vulnerability. Also, according to Washkansky (1996), in a sense counsellors are colluding with the silence in order not to overwhelm the organization with the feelings of powerlessness evoked when dealing with rape trauma.

Again the contextual and societal influences should be considered to help our understanding of the silence. Elieli (1994) also cautions that, in every phenomenon, it is necessary to look at a sign of something else, deeper and broader within the system and to try and find its symbolic meaning. This "silence" is paradoxical to the message that Rape Crisis promotes to survivors in terms of "speaking out" about their experiences. In our society, there have been considerable developments in freeing women, however still only one in 35 women report rape (Rape Crisis, undated). Domestic violence and rape were traditionally regarded in our society as "private matters". According to Crawford-Cousins (1996), women are embarrassed to speak about the violence and it becomes a "hidden" matter. This silence may be the effect of gender oppression as traditionally women are given and claim less time and space and are silenced by the weight of social practice which gives no place or space to speak. Also as discussed earlier within the Black Community, there is the

challenge for counsellors in Khayelitsha of working within a traditional African tradition where speaking to "outsiders" (such as counsellors) is not accepted - problems are expected to be kept "within" the family. This, of course, perpetuates the "silence" of violence against women further.

Counsellors also mentioned their frustration with their inability to obtain assistance from unsympathetic social institutions. Because of the way rape survivors are treated in court and the poor conviction rate, many women have been discouraged from reporting and laying charges. This "silence" is thus further perpetuated by social institutions and often counsellors who have a desire to help these women are silenced and not heard by these institutions.

Another element of socialization, which may contribute to the silence, is that women are socialized in the home into "doing the emotional housework" (Crawford-Cousins, 1996). In other words they look after their family's emotions, maintaining other's physical as well as psychological wellbeing, sometimes at the expense of their own. A counsellor describes:

"Because every time I am doing this job, I am so strained, I wish I could help this person"

Another counsellor describes how she wanted to stop counselling, but decided against it:

" And I weighed things up and I thought I'd rather be giving than worrying about how I am dying from giving.

In the family, the woman has always been cast as the nurturer, full of compassion and wanting to give and to 'rescue' others. It has created a culture of servicing others and not herself. What then becomes difficult is 'How do I nurture myself?' It is not surprising that increasing numbers of women are found in mental health professions. As previously noted, according to Fineman (1985) in Newton et al (1995), helping professions often do not know how to help themselves. Those in the helping profession often have difficulty in expressing their own needs because of a sense that they should project a "coping image",

making it more difficult for counsellors to voice distress.

In view of the change in the organisation to a hierarchical structure, it is necessary to be aware of the possible threat to "silencing" the counsellors as there will obviously be more channels to go through to voice concerns and issues.

It becomes evident that for the well being of counsellors there is a need to talk about their difficulties. However, in view of the nature of their work, as well as in society, women have been silenced and isolated making it difficult to voice their feelings collectively against oppression and exploitation.

#### 4.3.3 Other means of coping

However, not all counsellors expressed a need to always talk about their experience. One counsellor talked about how sometimes she does not want to talk too soon after a session, almost in a possessive manner and not clearly understanding why. Another counsellor recounts:

"You know it is strange, but I often just want to keep them to myself. I often just want to sit with them, they keep me warm in a way. You know I really can relate to pain, I really, really can. I've got my own personal circumstances, that I think are healed by my counselling here. And in a very selfish way I .... keep them coming back. So it is easy for me to just feel those things inside of me and take them with me. You know that sad feeling. In a way they sit somewhere with my pain and they do something to each other. I just know the pain, my pain and their pain, I don't know they interrelate somehow and I could say they made me stronger and braver. I do draw a lot of strength I must say, I do draw a lot of strength from them in that way."

On a personal level, some counsellors discover "holding on" to painful feelings as a personal growing experience, as if drawing strength towards healing their own wounded self. There is thus a side of counselling which has to do with the counsellor, not

just the survivor. According to another counsellor, "I can't say I enjoy counselling, its a growing experience, learning about myself, about boundaries, me , how others relate to me, not enjoyable.." She goes on to say that the reason why she stays on is because she wants to find out why she often feels "abused" and "washed over " by the survivors. Schauben & Frazier (1995) point out that counsellors often learn about themselves through their reactions to clients and sometimes it helps heal their own past victimization. Thus, the counsellor somehow "gains" personally from the counselling relationship. One counsellor states that in supervision there is no space to deal with herself. It is also reflected that counsellors need space to work through their individual responses to their clients: a time for introspection in order to learn about themselves. The focus group talked about how, like the rape survivor, the counsellor also often has shame and pain which is too difficult to share. In a sense, countertransference can be both a strength and weakness in terms of coping.

Apart from talking, counsellors also mentioned other means of coping: reading, exercising, sport, going out with friends, drinking a beer or religion:

"I can say it is always to pray, only pray I can say. It is only God that help inside me, because I am doing this job, and I ask God to help me to help these people."

On the other hand counsellors are volunteers and have other work commitments which helps to create some distance:

"Ja, it helps to have something else to complement stress with. Otherwise you get your mind running around and dealing with emotions all the time. I think the only way that I am able to cope right now, is because I got something else. So it suits me to be a volunteer kind of work or to be part time."

"I think I wanna try and get to my life, to my reality. There is that feeling again like you just want to get back to your basic..."

Some of the strategies mentioned by counsellors are similar to

findings of Schauben and Frazier (1995), in their study of counsellors of sexual abuse survivors. They found that the strategies which counsellors used most were: actively doing something about the problem, seeking emotional support, getting advice and using humour. The strategies least used by these counsellors included alcohol and drugs, denial and behavioural disengagement. Other strategies offered by counsellors in their study were exercise, healthy eating, spiritual activities, fewer clients, cognitive restructuring and political activities.

In summarising the ways in which counsellors deal with stressful experiences, individually counsellors agreed that talking helps them. Supervision, counsellors' meetings or informally talking to other counsellors were also deemed to be helpful. Although individually talking was seen to be important, the organisation is having problems with poor attendance of supervision and counsellors meetings. In an attempt to understand this silence, I looked at a combination of factors: the need to be aware of the shame of feeling vulnerable, of being humiliated, violated and often self blame evoked by rape. The whole organisation could be "containing" these powerful affects for the survivors and counsellors colluding with this "silence" so as not to overwhelm the organisation. The role in which women have been socialized adds to the silence. In society, rape and violence against women are seen as a "private" "hidden" matter and that somehow the women are to blame for violence against them. Gender oppression has also caused women to take up the role of servicing others, finding it difficult to look at their own needs. However, Rape Crisis is going through a process of change and this may be contributing to the poor attendance of supervision and counselling meetings. Counsellors also expressed other ways of helping them deal with the stress of counselling, such as exercising, reading, praying, etc. which are part of the general modes of coping used.

#### 4.4. Counsellors perception of their work

##### 4.4.1 Power Struggle

The theoretical review shows the importance of eliciting the meaning which people ascribe to their situations as this influences their means of dealing with experiences. I thus looked specifically at how counsellors perceive their work. A theme which developed from the analysis was that of rape counselling being framed as a contribution in the fight for women who have little or no power in society. One counsellor comments:

"Not just within Rape Crisis, but as a counsellor for rape victims. I see it almost contributing to combat crime... Because I would like to contribute to fighting against crime..."

Some counsellors seemed to frame their understanding of the work which they are doing in Rape Crisis as a contribution, a means of contributing to a greater "cause". They identify with the vulnerability of being a woman in a patriarchal society. These counsellors work with women whose rights have been violated and who have been stripped of the little power they possess in society.

"really believe, very strongly that it is a power thing more than anything else, it is also not something that you can pretend to understand until it happens to you I think."

Their work is not isolated from the social variables which operate in society. The power relation, which is identified as their main source of struggle, is gender relations.

"But, I think it is an illness that society have got to deal with. It is symptomatic of greater sins and I think male chauvinism is one great thing about it. I don't hear of too many woman raping anybody."

Power is thus seen to be an important defining variable in the way in which counsellors perceive their work. This is not surprising as Rape crisis counselling makes one so acutely aware of rape as one of the manifestations of gender inequality in

society.

#### 4.4.2 Collective

Power, according to (Orford, 1994), has both an individual and collective quality . There is an awareness of there being something more than individual cases and counsellors. There is a social battle to be fought.

"I just think that you've got to fight back in any way whether it is by teaching people, gender education or just keeping a fight going. We can fight back."

A fight implies that there is an enemy to be defeated. The collective of the counsellors is reflected in the "we" and refers to the organisation. The collective goal and interest identified by the counsellors is their fight against violence against women in a dominantly patriarchal society. According to Eleili (1994: p.90), an organisation has its own inner life and "the reality of an organization is the common hypotheses held by the members as to "what is going on".

As Eleili (1994) notes that being part of a unified collective resistance "we", brings a sense of calling and meaning to work. It would thus appear that the collective "we" and the ideology of fighting for women's rights in society could act as a means for coping. One way for powerless groups to become mobilised for social action is an awareness of their collective identity with a common commitment to a goal. Again, there is the use of a "common goal" as a unifying force to help cope (Orford, 1994).

The collective is the organisation and also, what it stands for. Counsellors often refer to the supportive and somewhat closed structure of the organisation, where older members experience the organisation and each other in a personal and intimate manner. They describe each other as more than working colleagues and thus feel able to share their experiences and feelings. An "older" member recounts:

"We are all doing, we are moving in some direction. The

organisation is very homely, [unclear] ,... the people learn, quite intimate. So that helps ... we are a very safe environment. And is not that anyone is moving away some direction from the general overall course helping victims of rape. And that, I think that is the most important thing we are all moving towards the same goal."

However, among the new counsellors, there was a feeling of being outsiders in the organisation compared with the bond between "older" members. A "new" counsellor felt that, in conjunction with the training course, an "orientation" into the organisation would have helped her. The safe bond setup by the organisation is viewed by new counsellors as necessary and in time they will feel included.

"Ja, I think it helps in the sense that it is very close, maybe that is ...I think we were excluded, but in a sense that I can feel there is such a close network. That is why I maybe don't mind being excluded, if I need to, I could be included. Ja I feel there is a very, very strong network. People here I think, you know they are prepared to help, because what we are doing here is helping other people, so there is a sense of help available. Information available, being listened to when you need to."

Thus, the bond is perceived as permeable. More active involvement in the organisation other than counselling is seen as moving inside the "close network". In other words the older members seem to constitute the close network. It would seem that this "closeness" provides a feeling that the organisation is safe. These boundaries are seen as very supportive and thus containing, and also protective. They are able to contain the often expressed feelings of vulnerability amongst the older members amongst the counsellors.

Rape Crisis forms a "close network" while there seems to be a perception of the outside world as "bad" in terms of being exploitative, domineering, oppressive and unsupportive towards

women. Rape Crisis on the other hand is held as "good", in terms of representing equality, empowerment and being supportive of women. This perception of the outside world is not surprising as historically Rape Crisis has experienced little support from police, medical and legal systems towards rape survivor issues. Despite the advocacy and public education, counsellors still battle with unsupportive police and legal systems. However, keeping the bad outside tends to reinforce the fear.

An attempt to deal with anxieties brought in by the survivors and perceived threats from outside come in the form of needing and creating a strong organisational bond. This bond can be sensed particularly amongst "older" members, while "newer" members are aware of this close network and eventually work towards inclusion or exclusion by leaving the organisation. Again according to Washkansky (1996), Rape Crisis has a "powerful need to belong to a group and a further need to maintain the cohesion of the group" as a means of defending against "the powerlessness in fighting violence against women, and the trauma and anxiety likely to be evoked in working with this client population"(p.18). Stein (1994: p.33) also indicates that groups offer a means of avoiding a sense of being "utterly alone, empty, unenclosed, falling to pieces". We thus "locate ourselves inside something safe and secure, to give us life and to take away our hurt". This bond seems to act as a defence against both the underlying unconscious anxieties brought in by the clients and perceived threats from outside.

According to Diamond (1993) as cited in White (1997), the concept of an organization's identity, which refers to a network of feelings, emotions, and experiences shared by members of an organization, is important. The Rape Crisis identity offers counsellors a common goal and a collective identity. According to Klein (1987), self-imagery has a strong organizing function in keeping us coherent, consistent, and unfragmented, that is a self in the world. We also conform and are guided by what we imagine ourselves to be. Stein (1994) sees that in sharing and

constructing a "we"ness is incorporated into the self and the "image of the group becomes an outer social skin of the self" (p.33).

We thus understand the need for and function of the collective "we" in providing strength and a safe space for counsellors, in this way, playing a major role in helping counsellors to cope. However, in the light of this "powerful" need for group cohesion there seems to be little space for voicing differences. The majority of counsellors talked very positively about Rape Crisis and while this might be an accurate reflection of their feelings about the organisation, it is possible that there was an inhibition of their freedom to talk about conflict amongst members. It also raises the issue that Rape Crisis consists of a range of counsellors from different cultural backgrounds and it is surprising that little mention was made by the participants. The need for cohesion can prohibit differences amongst counsellors from emerging. There is a sense that differences could break the "we-ness" and threaten the collective identity which they draw strength from.

#### 4.4.3 Feminism

As already noted feminism provides an important framework for counsellors understanding of their work.

"Because I really enjoy the people here and I enjoy the ideology and I enjoy the learning that comes out of the sharing that you do. Because invariably you find that the people here are people who relate to the world at a very hearty kind of level. And that is what I like about people."

There is again a sense of 'sharedness' and connection reflected amongst counsellors. One counsellor adds:

" It makes my job as a counsellor very meaningful. Because from a theoretical point of view it is easy to say I understand what happened."

In considering the history of the feminist beliefs and its influence on Rape Crisis in Observatory, it appears that this

provided a strong framework for counsellors whereas this is less evident in the Khayelitsha office which has been operating for a shorter period of time. Feminist beliefs therefore seem for most counsellors to provide a way of understanding the occurrence of rape in our societies. Maintaining a focus on the larger purpose of trauma counselling is valuable and significant, because it reminds counsellors why they are doing the work and provides a holding context of meaning that renews them (Dyregrov & Mitchell, 1992, in Pearlman & Saakvitne, 1995). In providing a frame, which enables counsellors to contain something as traumatic as rape. Feminist beliefs also provide a bonding force against social injustice, especially within an organisation where it helps the connection with other like-minded women.

In addition to feminism providing a framework for understanding rape, also according to Comas-Diaz and Padilla (1990) in Pearlman and Saakvitne (1995), working for social justice offers the restoration of a positive world view. A sense of purpose stems from social action and that social action enables counsellors to overcome a sense of helplessness. It is a way of discharging their outrage, thus helping to work against vicarious traumatization experiences of counsellors. The strong unifying bond, in terms of a common cause, attempts to work against powerlessness and helps in coping with the anxieties of rape counselling. The challenge to the feminist ethos of the organisation in the form of the shift towards a more professional and corporate operation, may threaten this important identity. The cohesive feminist identity of the organisation appears to represent a valuable way of making meaning of and managing the traumatic feelings around rape.

#### **4.4.4 Powerlessness**

It is also evident that although the collective empowers the individual, there is still powerlessness felt amongst counsellors. Because of the one-to-one nature of counselling, counsellors also experience a sense of individual responsibility and often a sense that they are not "doing enough". It seems as

that individually counsellors carry a lot of the responsibility for "healing" the rape survivors and this results in a feeling of powerlessness.

"I think I have mentioned that before, that after counselling, after you have counselled somebody, you never know if you have done the right thing. You never know if you have given that person enough. You always ask yourself this question... And we called all the Observatory counsellors, and they came here and when I told them this is what we feel after we have counselled a client. They said no, we are all going through that. You never know if you have given enough, you never know if you have helped that person. Some people will come, or some people will phone and say thanks, some don't. So you don't know whether that person that hasn't called you or hasn't contacted you or hasn't said thank you. If you have done enough for that person, you see. So it is something I think everybody, every counsellor that goes through it. You know you sit with this, I wonder if I have helped this person...

This also reflects that in society women are often made to feel that rape was their fault, or in domestic violence, maybe 'I did something to provoke him'. Often the message given to victims of domestic violence and rape is to start believing that "I am not to blame..., I am not the cause ..." (Motsei et al, 1996: p 81) reflecting the need to work against self-blame amongst women. However, because society somehow blames women for rape or domestic violence, this often causes an element of self-blame which tends to isolate women, leaving them powerless. This unsympathetic attitude in society to violence against women is also felt by counsellors. As discussed earlier, counsellors often struggle in obtaining help from other social institutions and this also contributes to feelings of powerlessness.

In summary, in investigating how counsellors perceive their work there seems to be a realization of power and gender issues in society. All counsellors stressed that they are contributing

towards a greater "cause", that is, helping fight violence against women. This "common goal" seems to contribute towards group cohesion and a sense of "we-ness" from which individual counsellors draw strength. The feminist "ideology" shared by the organisation also helps promote the sense of standing together in fighting for women's rights as well as providing a frame for understanding the traumatic stories of rape survivors. There seem to be strong organizational boundaries indicating a need for belonging in a group and that acts as a "social skin" to protect counsellors from external threats as well as internal anxieties. However, this need for cohesion may not always allow for differences or conflict amongst counsellors. Counsellors also need to face the changes which are occurring at a core structural level which will inevitably lead to differences and a threat to their feeling of cohesion. Although there is strength in the collective, many counsellors feel an individual responsibility for "healing" the survivor as well as being faced with unsympathetic social institutions which leads to feelings of powerlessness.

## 5. CONCLUSION

It appears that counsellors are struggling with issues which stem from the anxieties elicited by the nature of dealing with rape survivors as well as with parallel institutional, social issues. The themes of boundaries, silence, power and the collective recur in counsellors' descriptions of their experiences, difficulties and coping with their role as rape counsellors. It is not surprising that these issues have emerged, bearing in mind that the counsellors are dealing with women who have been raped and perhaps carry some of their feelings of being violated, dominated, silenced and isolated.

Counsellors deal with rape survivors who have gone through a traumatic process and consequently carry painfully intense emotions which need to be shared and worked through. Some of the issues which rape survivors have to deal with include feeling violated because rape is an act of unwilling penetration into bodily boundaries. It also results in a violation of the sense of personal safety and security. Often rape survivors struggle with self-blame and the shame of being humiliated, leaving them unable to talk about their experience. They are thus silenced and isolated from other rape survivors experiencing the same emotions. Through the process of rape, the rape survivor is left feeling powerless as the rapist has enforced control and power over her.

Based on feedback from counsellors, the issues with which they struggle seem to have a parallel with the experiences of the rape survivor. Many counsellors discussed an emotional intensity in the experience of counselling in which the feelings of the rape survivors seem to be transmitted. Counsellors also expressed the need to talk after a counselling session. Two counsellors related instances which reflected a degree of what literature has recognised as vicarious traumatization where their personal sense of safety in the world has been threatened. However, more important than these particular symptoms in this research is the

way in which counsellors' experiences of rape counselling are made up of a complex mixture of directly transmitted feelings, organizational stressors as well as the conscious and unconsciously felt impact of the social context.

Similar to many rape survivors feelings of being violated and contaminated, a theme of difficulties emerged among counsellors in maintaining boundaries with survivors. This includes having a strong identification with the survivor, or difficulty in separating from feelings evoked from counselling, or where the counsellor feels that she needs to take more action than is normally required of a counsellor. In some way, this experience must be like a violation of the private or personal space of the counsellor.

Because of the intensity and nature of the work counsellors often struggle with maintaining boundaries with survivors. Klein (1987) alerts us to the important functions that boundaries provide in terms of coping. Klein sees coping as equivalent to ego functioning, that is "the recognition of our ability to survive and to deal with people and things in order to survive" (p.329). This requires thinking, understanding, making connections, planning ahead, thinking back, and making sense of life. Ego functions are seen as one aspect of "holding" or keeping connections, in other words not "falling apart". Boundaries thus act as frames which provide restrictions or limitations. In other words, these frames allow for space and protection that help to order experiences. Thus various experiences can safely be integrated and connected so as not to get lost or cut off prematurely. Boundaries are holding and containing and being without boundaries can feel like "falling apart": there is no sense, or ability to find a framework of meaning in which to organize what is happening. Boundaries are seen as facilitating organization for anxieties, feelings and thoughts. If counsellors experience difficulties with maintaining boundaries, this could lead to feelings of "falling apart" or, in other words, not coping. Clear boundaries thus seem to be important, but

counsellors should be aware that dealing with rape survivors' pain could bring up issues around violating boundaries.

In exploring how counsellors cope with counselling, all mentioned that talking about their experiences helped, but that in the organisation the structures set up for these purposes (supervision and counselling meetings) were poorly attended. There is a "silence" as talking is not taking place as often as counsellors would like. It is not the survivors alone who struggle with wanting and needing to talk about their rape experience, but are silenced. It seems that organizationally counsellors find it difficult to speak about the shame and humiliation surrounded by rape trauma and feelings of vulnerability. There may be a collusion not to talk about the unbearable aspects in order to avoid overwhelming the organisation (Washkansky, 1996). However, those in helping professions often have difficulty in showing their own distress because of the need to portray a "coping image" (Fineman, 1985, in Newton et al, 1995) . It also appears that because counselling takes place on a one-to-one basis, counsellors often feel the individual responsibility to heal the survivor and often gain little support from social institutions which leads to feelings of powerlessness and isolation. It seems that it is not only the survivor who feels the sense of powerlessness and lack of control, but also the counsellor.

These issues which counsellors struggle with might be understood to be rooted in society. A study of women's roles in society sheds greater light on the struggles of the counsellors. Counsellors' difficulties with boundaries and feelings of violation become understandable when we look at the way women have been socialized to take care of others (especially in the family). Jayaratne and Stewart (1991: p.94) describe the "male voice, which defines the self in terms of distinctness and separation from others, and the female voice, which defines the self in connections and relationships". This indicates that to be female is to "be there for others" and to give of yourself

which sometimes may be felt as a violation of personal space and emotional resources.

Where counsellors experience a "silence" in voicing difficult matters, we find that in society women's voices have been silenced. In society, violence against women has somehow been construed to "be their own fault" and they are to blame for being raped, leading to many women not reporting rape or talking about it. Counsellors also reflect the problems of unsympathetic medical and legal systems towards rape survivors as a source of stress. Through sexism, few women are in positions of power and consequently have little to say on public and political issues. As a social group, therefore they are in possession of little social power. Counsellors also noted the difficulty in accessing social resources to help them with rape survivors. Women in society are sometimes left feeling powerless and silenced.

There is thus the question, bearing in mind all these factors, of how counsellors deal with stress. They say that talking about their counselling helps, but the silence seems to be a means of keeping anxieties arising from working with rape survivors at bay. The organization is thus protected from immense anxieties, feelings of powerlessness, vulnerability etc. Although counsellors recognize the need to "break the silence" around rape, it is difficult to voice their own difficulties.

The collective and sense of belonging to a group is an important source of support for counsellors. There is also the awareness that their work is embedded and affected by contextual variables, especially power and gender, which reflect the interconnectedness of the experience of stress and coping of individuals to social issues. A common element amongst counsellors is that they form meaning around their work in an effort to help fight for women who are victims of sexual abuse. There is often a reference to "we" and strength is found in that. It indicates a sense of belonging to the collective identity where working towards a common goal and contributing towards the broader cause helps the

plight of abused women in society. Group cohesion is important and in considering the emotionally intense nature of the work which counsellors deal with, it is understandable. The group is needed for the counsellors not to feel powerless and isolated. However, this may present problems of not feeling able to voice differences or deal with conflict for fear of breaking the unity.

Part of the unified voice is provided through a shared feminist ethos which forms core guidelines for the organization. It offers a frame for understanding and making sense of the violence against women in society. It also provides "guidelines" on helping other women in society and promotes the sense of working as a collective against injustice.

However, some aspects of feminist beliefs informing the organisation in a manifest way are difficult for counsellors to maintain. The concepts of "identification", "affectedness and concern" can be difficult in such emotionally intense work and it may lead to problems in maintaining boundaries. Rape Crisis, in a sense approves of more humane approaches to helping people, but the organisation is using certain aspects of professionalism that results in a contradiction with the idea of being "humane". Original feminist roots in Rape Crisis also promoted a "flat" structure but, there has been a change towards instilling a hierarchical structure with a director. This also seems to contradict with the original Rape Crisis identity, and poses a threat to the much needed cohesiveness of the counsellors.

In reflection on my role as researcher, I must note that I am a woman, and have been working with Rape Crisis for a year, and although I have attempted to allow the counsellors' voice to be heard, my own voice may well be found in this research. I also agree with Gould (1994) that one must be aware of the limitations of one's own work. I became aware that it would have been preferable to investigate Observatory and Khayelitsha counsellors separately in order to fully capture their uniqueness.

## 6. RECOMMENDATIONS:

The process of coping appears to be complex and is not easily translated into practice, but based on this study I will explore certain recommendations which may be significant for Rape Crisis and other organizations dealing with trauma counselling. It seems that support groups, supervision and counselling meetings are important, especially for counsellors who indicated that talking about their experiences helps them. However, counsellors should be encouraged to consider the issues of silence and enforced unity and develop insights into the constraints around these issues. Although fostering group cohesiveness is important, there should also be a safe space to introduce and discuss differences, without these being a threat to the group's cohesiveness.

The process of change for any organization is difficult and should be undertaken with much sensitivity, negotiation and collaboration with the whole organisation so as not to isolate or neglect certain groups. In negotiating change, it is vital for members to receive continuous feedback, bearing in mind that changes to the core identity of the organisation can evoke fears of fragmentation. Members should be made aware of the changes and the necessary adaptations.

The tension and contradiction often found in counsellors' communications pertaining to Rape Crisis's ethos of "staying human" whilst having strands of professionalism needs to be addressed, as these contradictions may prove to be difficult to hold and cause anxieties. Counsellors would appear to be deprived of some of the safeguards of professionalism (such as maintaining boundaries) and at the same time robbed of the relaxation of non-professionalism (in other words, they are not supposed to cry, should limit self disclosure, maintaining ethics, etc). It should be acknowledged that certain aspects of professionalism can be useful in protecting the counsellor and these form part of their "humanistic" approach. Counsellors roles and boundaries should be discussed with the aim of using the

safeguards of professionalism and the relaxation of non-professionalism.

On a more experiential and personal level, counsellors should also have time for self-reflection. This would allow for detecting signs of vicarious traumatization as well as the opportunity for personal growth and it can be self-nurturing. A climate of nurturing oneself and each other is vital in such emotionally-draining work. This culture of self-nurturing is also essential, especially in society where women have been socialised to do the emotional servicing of others and find it difficult to nurture themselves.

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